

BEFORE THE PUBLIC UTILITIES COMMISSION OF THE STATE OF CALIFORNIA



Application for Registration License

**FILED**

04/18/22

04:59 PM

A2204014

1 Application of

**IT Assurance LLC**

for Registration as an Interexchange Carrier  
Telephone Corporation Pursuant to the  
Provisions of Public Utilities Code Section 1013.

(Insert the full legal name of applicant in blank above; see instruction 1)

Street address:

**14 SE 14th Avenue, Portland, OR 97214**

Telephone: **(503) 785-9000** Fax No.: **None**

E-Mail: **hello@itassurance.com**

**1.A. List all fictitious business names under which applicant has done business in the last five years:**

2 Applicant is:

(Check only one; see instruction 2.)

- |  |                                     |
|--|-------------------------------------|
| A corporation (attach good standing certificate)               | <input type="checkbox"/>            |
| A limited partnership (attach good standing certificate)       | <input type="checkbox"/>            |
| A limited partnership (attach good standing certificate)       | <input type="checkbox"/>            |
| A limited liability company (attach good standing certificate) | <input checked="" type="checkbox"/> |
| A general partnership  | <input type="checkbox"/>            |
| A sole proprietor  | <input type="checkbox"/>            |
| A trust  | <input type="checkbox"/>            |
| Other (describe)   | <input type="checkbox"/>            |

***Attach name, street address, and telephone number of applicant's registered agent for service of process.***

***Attach list of the names, titles, and street addresses of all officers and directors, general partners, trustees, members, or other persons authorized to conduct the business of applicant at a similar level.***

***Attach resumes listing all employment for each officer and***

2/17/15


	<i>director.</i>	
	<i>Attach list of all affiliated entities (see instruction 2)</i>	
<b>3</b> Legal domicile of applicant is:	California <input type="checkbox"/> Other (identify): <b>Oregon</b> <input checked="" type="checkbox"/>	
(Check only one; see instruction 3.)		
<b>4</b> Applicant will operate as:	Switchless reseller <input checked="" type="checkbox"/> Facilities-based carrier <input type="checkbox"/>	
(Check only one; see instruction 4.)		
<b>5</b> Applicant will provide service:	Statewide <input checked="" type="checkbox"/> In specific portions only (attach description and map) <input type="checkbox"/>	
(Check only one; see instruction 5.)		
<b>6</b> Applicant <u>expects to</u> begin offering service in California on:	<b>Upon approval</b> ( date)	
<b>7</b> Applicant will provide: voice and data telecommunications only	True <input checked="" type="checkbox"/> Not true <input type="checkbox"/>	
(Check only one; see instruction 6.)		
<b>8</b> Neither applicant, any of its affiliates, officers, directors,	True <input checked="" type="checkbox"/> Not true <input type="checkbox"/>	
<p>partners, agents, or owners (directly or indirectly) of more than 10% of applicant, or anyone acting in a management capacity for applicant: (a) held one of these positions with a company that filed for bankruptcy; (b) been personally found liable, or held one of these positions with a company that has been found liable, for fraud, dishonesty, failure to disclose, or misrepresentations to consumers or others; (c) been convicted of a felony; (d) been (to his/her knowledge) the subject of a criminal referral by judge or public agency; (e) had a telecommunications license or operating authority denied, suspended, revoked, or limited in any jurisdiction; (f) personally entered into a settlement, or held one of these positions with a company that has entered into settlement of criminal or civil claims involving violations of sections 17000 et seq., 17200 et seq., or 17500 et seq. of the California Business &amp; Professions Code, or of any other statute, regulation, or decisional law relating to fraud, dishonesty, failure to disclose, or misrepresentations to consumers or others; (g) been found to have violated any statute, law, or rule pertaining to public utilities or other regulated industries; or (h) entered into any settlement agreements or made any voluntary payments or agreed to any other type of monetary forfeitures in resolution of any action by any regulatory body, agency, or attorney general. (Check only one; see instruction 2.)</p> <p>If your answer to this question is anything other than an unqualified 'True', please attach documentation and describe any such bankruptcies, findings, judgments, convictions, referrals, denials, suspensions, revocations, limitations, settlements, voluntary payments</p>		

or any other type of monetary forfeitures.

<b>9</b> To the best of applicant's knowledge,	True Not true	<input checked="checked" type="checkbox"/> <input type="checkbox"/>
neither applicant, any affiliate, officer, director, partner, nor owner of more than 10% of applicant, or any person acting in such capacity whether or not formally appointed, is being or has been investigated by the Federal Communications Commission or any law enforcement or regulatory agency for failure to comply with any law, rule or order. (Check only one; see instruction 2.)		
If your answer to this question is anything other than an unqualified 'True,' please attach documentation and describe all such investigations, whether pending, settled voluntarily or resolved in another manner.		
<b>10</b> Applicant will obtain a continuous bond, issued	True (attach documentation) Not true	<input checked="checked" type="checkbox"/> <input type="checkbox"/>
by a corporate surety company authorized to transact surety business in California, in the amount of \$25,000 that will be in effect during all periods of operation, and lists the California Public Utilities Commission as the obligee. Applicant will submit an Information-Only advice letter to the Director of the Communications Division containing a copy of the Applicant's executed bond within five business days after the effective date of the issuance of a registration license. (Check only one; see instruction 8.)		
<b>11</b> Applicant has a minimum of (a) \$25,000 in	True (attach documentation) Not true	<input checked="checked" type="checkbox"/> <input type="checkbox"/>
the case of a switchless reseller OR (b) \$100,000 in the case of a facilities based applicant, in each case reasonably liquid and available to meet the firm's first-year expenses, including deposits required by local exchange carriers or interexchange carriers or (c) has profitable interstate operations to generate the required cash flow. (Check only one; see instruction 9.)		
<b>12</b> Applicant has the required expertise to	True Not true	<input checked="checked" type="checkbox"/> <input type="checkbox"/>
operate as an interexchange carrier of the type indicated in the application.		
<b>13</b> Applicant is eligible for an exemption from	True Not true	<input checked="checked" type="checkbox"/> <input type="checkbox"/>
tariffing requirements as set out in Commission Decision 98-08-031 and seeks such an exemption. (Check only one; see instruction 10.)		

I hereby declare under penalty of perjury under the laws of the State of California that the forgoing information, and all attachments are true, correct, and complete to the best of my knowledge and belief after due inquiry, and that I am authorized to make this application on behalf of the applicant named above.

Signed:

  
\_\_\_\_\_  
Name **Zachary Cramer**  
Title **CEO**  
Dated **04/05/2022**

Street  
Address **14 SE 14th Avenue, Portland, OR 97214**

Telephone **(503) 785-9000**  
Fax **None**  
E-mail **zac@itassurance.com**

**Principal Place of Business (if different from address on page 1).**

Street Address **Same as above**  
City  
State  
Zip  
Phone No.

**IT Assurance LLC**

**Attachment A**

**Registered Agent**

**Registered Agent:**

Corporation Service Company

2710 Gateway Oaks Dr # 150, Sacramento, CA 95833

[info@cscglobal.com](mailto:info@cscglobal.com)

Phone: 916-641-5100

**IT Assurance LLC**

**Attachment B**

**Company Officers**

**Company Officers:**

**Zachary Cramer – CEO**



**IT Assurance LLC**

**Attachment C**

**Resumes of Officers**

## **Zachary Cramer, CEO**

### **IT Assurance LLC, CEO**

Jun 2010 - Present

- I own the world's best IT consulting company. We're also the only diverse IT company: a majority of our employees are people of color and those who identify as women or members of the LGBTQIA+ community.
  - We help companies manage their IT infrastructure and provide help desk service to their workers. We also sell and support awesome business phone systems.
  - We set ourselves apart from the competition by integrating deeply with our clients. We don't just meet once a quarter to review meaningless stats — we get in there! We participate in your regular management meetings, we post memes to your Slack and Teams channels, and we click "like" on the cute animal pictures too.
  - We become a part of the clients we support, not just a vendor you hire to do IT.
- I own the world's best IT consulting company. We're also the only diverse IT company: a majority of our employees are people of color and those who identify as women or members of the LGBTQIA+ community. We help companies manage their IT infrastructure and provide help desk service to their workers. We also sell and support awesome business phone systems. We set ourselves apart from the competition by integrating deeply with our clients. We don't just meet once a quarter to review meaningless stats — we get in there! We participate in your regular management meetings, we post memes to your Slack and Teams channels, and we click "like" on the cute animal pictures too. We become a part of the clients we support, not just a vendor you hire to do IT.

### **Happy Hamster Computer, CEO**

July 2008 - Feb 2018

- Executive role in customer centered business concentrated on providing strategic direction and managing employees. •
- Oversee 4 employees including Store Manager and Technicians, managing budget of \$250K.
- Ensure impeccable customer service administering 3,000 clients per year. • Carved strong brand position in fast-paced business environment becoming most successful computer store in Portland, OR.
- Set up of business operations running profitably and autonomously.

### **www.riderscartel.com, CTO**

2004 - 2007

- Executive position focused on development and maintenance of social media platform.
- Managed \$100K budget.
- Designed, developed and maintained early YouTube competitor website.
- Generated traffic and broadened outreach to 1,000,000 visitors per year.

**Education**

**Boston University**

Bachelor of Arts, Classical Civilization (2003-2007)

**IT Assurance LLC**

**Attachment D**

**Certificate of Good Standing**

**State of California**  
**Secretary of State**  
**Certificate of Registration**

I, SHIRLEY N. WEBER, Ph.D., Secretary of State of the State of California, hereby certify:

Entity Name: IT ASSURANCE LLC

California Name: IT ASSURANCE LLC

File Number: 202208310274

Registration Date: 03/16/2022

Entity Type: FOREIGN LIMITED LIABILITY COMPANY

Jurisdiction: OREGON

The above referenced entity complied with the requirements of California law in effect on the Registration Date for the purpose of qualifying to transact intrastate business in the State of California, and that as of the Registration Date, said entity became and now is duly registered and authorized to transact intrastate business in the State of California, subject however, to any licensing requirements otherwise imposed by the laws of this State and that the entity shall transact all intrastate business within California under the California Name as set forth above.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of March 25, 2022.

**SHIRLEY N. WEBER, Ph.D.**  
Secretary of State



Secretary of State

LLC-5

**Application to Register a Foreign Limited Liability Company (LLC)**

202208410274

WJ

**IMPORTANT — Read Instructions before completing this form.**

Must be submitted with a current Certificate of Good Standing issued by the government agency where the LLC was formed. See Instructions.

Filing Fee - \$70.00

Copy Fees - First page \$1.00; each attachment page \$0.50;  
Certification Fee - \$5.00

Note: Registered LLCs in California may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to <https://www.ftb.ca.gov>.

**FILED**  
Secretary of State  
State of California

MAR 16 2022

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This Space For Office Use Only

**1a. LLC Name** (Enter the exact name of the LLC as listed on your attached Certificate of Good Standing.)

IT Assurance LLC

**1b. California Alternate Name, if Required** (See Instructions — Only enter an alternate name if the LLC name in 1a not available in California.)

**2. LLC History** (See Instructions — Ensure that the formation date and jurisdiction match the attached Certificate of Good Standing.)

a. Date LLC was formed in home jurisdiction (MM/DD/YYYY)

1 / 18 / 2018

b. Jurisdiction (State, foreign country or place where this LLC is formed.)

Oregon

c. Authority Statement (Do not alter Authority Statement)

This LLC currently has powers and privileges to conduct business in the state, foreign country or place entered in Item 2b.

**3. Business Addresses** (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)

a. Street Address of Principal Executive Office - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
14 SE 14th Ave.	Portland	OR	97214
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
		CA	
c. Mailing Address of Principal Executive Office, if different than Item 3a	City (no abbreviations)	State	Zip Code

**4. Service of Process** (Must provide either Individual OR Corporation.)

**INDIVIDUAL** — Complete Items 4a and 4b only. Must include agent's full name and California street address.

a. California Agent's First Name (If agent is not a corporation)	Middle Name	Last Name	Suffix
b. Street Address (If agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
		CA	

**CORPORATION** — Complete Item 4c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (If agent is a corporation) — Do not complete Item 4a or 4b
Corporation Service Company Which Will Do Business In California As CSC - Lawyers Incorporating Service

**5. Read and Sign Below** (See Instructions. Title not required.)

By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized to sign on behalf of the foreign LLC.

Signature

Zac Cramer

Type or Print Name

# State of Oregon

OFFICE OF THE SECRETARY OF STATE  
Corporation Division

## Certificate of Existence 789D293J5

I, **SHEMIA FAGAN, SECRETARY OF STATE**, and Custodian of the Seal of said State, do hereby certify:

**IT ASSURANCE LLC**

is

Organized

*under the laws of The State of Oregon*

*and is active on the records of the Corporation Division as of the date of this certificate.*



*In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.*

A handwritten signature in black ink, appearing to read "Shemia Fagan".

**SHEMIA FAGAN, SECRETARY OF STATE**

3/10/2022



I hereby certify that the foregoing  
transcript of 2 page(s)  
is a full, true and correct copy of the  
original record in the custody of the  
California Secretary of State's office.

MAR 28 2022 *Sh*

A handwritten signature in cursive script, appearing to read "Shirley N. Weber".

SHIRLEY N. WEBER, Ph.D., Secretary of State



**IT Assurance LLC**

**Attachment E**

**Financial Information**

**FILED UNDER SEAL**

**IT Assurance LLC**

**Attachment F**

**Affiliated Entities**

IT Assurance LLC does not have any affiliated entities.